Case 2:14-cv-03564-KM-JBC Document 13 Filed 07/01/15 Page 1 of 3 PageID: 177 PROCESS RECEIPT AND RETURN

U.S. Department of Justice United States Marshals Service

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF	COURT CASE NUMBE	R
Ivan MCKINNEY		V03564
Lt-Picice/etal	TYPE OF PROCESS	Complaint
SERVE NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE	OR DESCRIPTION OF PROPERTY TO	SEIZE OR CONDEMN
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)		xunty Tail
AT Hackensack, N.J. 0760		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:	Number of process to be served with this Form - 285	1
Tyan G. M = Kinney Floors	Number of parties to be served in this case	5
L Torenton, X. J.08625	Check for service	
SPECIAL SERUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITIN		Iternate Addresses, All
Telephone Statubers, and Estimated Times Available For Service):		Fold
Bergen County	Jail	
		3 - 1.5
DISTRI		
Signature of Attorney or other Originator requesting service on behalf of	TELEPHONE NUMBER	DATE OF
clum M = Plaint iff Defenda	1/ .00	05-19-15
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — D	O NOT WRITE BELOV	W THIS LINE
I acknowledge receipt for the total Total Process District District Signature of Aye	NOT WRITE BELOV	Date
I acknowledge receipt for the total Total Process District District Signature of Aye	***************************************	
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Case 2:14-cv-03564-KM-JBC Document 13 Filed 07/01/15 Page 2 of 3 PageID: 178 PROCESS RECEIPT AND RETURN

U.S. Department of Justice United States Marshals Service

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF MCKinney	COURT CASE NUM	IBER KM SCM
Warden Robert Bigott Bergence	TYPE OF PROCESS	Complaint)
SERVE NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR Wavelen - Kobert Biggott Ber ADDRESS (Street of RFD, Apartment No., City, State and ZIP Code)	DESCRIPTION OF PROPERTY	TO SEIZE OR CONDEMN
AT 1605. Kiver Street Hackens	ack, N.J. E	0760/
Flaintiff- Ivan MCKinney#1601321	Number of process to be served with this Form - 285	/
Plaintiff-Ivan McKinney#601321 New Jersey State Prison P.O. Box 86,1	Number of parties to be served in this case	5
Trenton, N.J. 08625	Check for service on U.S.A.	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING Telephone Numbers, and Estimated Times Available For Service):	SERVICE (Include Business an	d Alternațe Addresses, All
Fold Parises, and Estimated Prints / Variable 16/1 Service).	Bergen Co	Jail Fold
chan M = Her		3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Signature of Attorney or other Originator requesting service on behalf of: PLAINTIFF DEFENDANT	TELEPHONE NUMBER	DATE 05-19-19
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO	NOT WRITE BEL	OW THIS LINE
	IZED USMS Deputy or Clerk	Date 5/28/15
I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more Signature of Adhorication Signature Signature of Adhorication Signature S	zed USMS Deputy or Clerk	5/28/j
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Case 2:14-cv-03564-KM-JBC Document 13 Filed 07/01/15 Page 3 of 3 PageID: 179

Penartment of Justice PROCESS RECEIPT AND RETURN

U.S. Department of Justice United States Marshals Service

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF YOU M			COURT CASE NUMBER	
	EKINNEY		2:14-M	03564
DEFENDANT apt. Par	W5011		TYPE OF PROCESS	is Complaint
SERVE NAME OF INDIVIDU	AL, COMPANY, CORPORATION, I	ETC., TO SERVE OR D		
ADDRESS (Street or	RFD, Apartment No., City, State a	nd ZIP Code)	Jare	
AT (1605.8)	River Street		159CK, N.J.	07601
SEND NOTICE OF SERVICE COPY TO I		!	Number of process to be served with this Form - 285	/
I Plaintitt Ivan G. M	McKinney#6 sey State Pri	50132	Number of parties to be served in this case	5
Trenton	161 N.J. 086	25	Check for service on U.S.A.	135 125 125 127
SPECIAL INSTRUCTIONS OR OTHER IS Telephone Numbers, and Estimated Times	Available For Comical:		<u></u>	Iternate Addresses, All
Fold	Ber	gen Cou	inty Jail	Fold
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				& 9"
Signature of Attorney or other Originator requ	uesting service on behalf of:	☐ PLAINTIFF	TELEPHONE NUMBER	DATE 05-19-15
Plaintitt-draw	IN ST	☐ DEFENDANT	None	<u>US-14-18</u>
SPACE BELOW FOR USI		T		V THIS LINE
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